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Refugee Health in Rhode Island

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The Office of Minority Health at the Rhode Island Department of Health formally initiated a Refugee Health Program in August 2004 with support from the Department's Tuberculosis Program and community-based refugee resettlement agencies. The goal of the program is to ensure that refugees enter into a comprehensive system of care that adequately responds to their unique health care needs. The Rhode Island Refugee Health Program works with **voluntary resettlement agencies (VOLAGS)**, state programs, and medical and social service providers to perform three core functions:

- Coordination of care,
- Education and training, and
- Surveillance and epidemiology.

As defined by the Refugee Act of 1980, a refugee is a person who is outside of his/her country of origin and is unable or unwilling to return to that country because of the experience or legitimate fear of persecution on the grounds of race, religion, nationality, membership in a particular social group, or political affiliation.¹ Resettling a refugee to a third country is the final option after first offering voluntary repatriation to the refugee's country of origin and then attempting to integrate the refugee within the host country.

At the conclusion of 2004, there were approximately 9,237,000 refugees worldwide.² That year, the United States

resettled 52,868 refugees, more than all the other countries that resettle refugees combined.² In federal fiscal year 2004 (October 1, 2003 – September 30, 2004), Rhode Island received 345 refugees, 0.65% of the national total. Generally speaking, states fall into one of three tiers for the number of refugees they resettle. RI is in the middle tier, with numbers in the hundreds. States like Minnesota, Florida, and Texas are in the top tier with thousands of refugees resettled annually. Other states like Alaska, Hawaii, and Delaware are in the lower tier, resettling fewer than 100 refugees per year.

The U.S. Department of State and Department of Health and Human Services administer programs to assist refugees resettled in the United States. Benefits are offered to five federally recognized categories of people: refugees, asylees, Cuban/Haitian entrants, certain Amerasians, and victims of severe forms of trafficking. Collectively, these populations are referred to as refugees. Refugees resettle by joining family members or communities where VOLAGS have agreed to manage their case. In Rhode Island there are two participating VOLAGS, the Diocese of Providence and the International Institute of Rhode Island. VOLAGS deliver refugee reception and placement services as part of cooperative agreements with the Department of State.

Refugee Arrival Data. The state of Rhode Island has welcomed more than 4,300 federally recognized refugees since 1980. Each year, the number of refugee arrivals fluctuates based on the stability in refugees' countries of origin, international affairs, and domestic resettlement targets, but in recent years, Rhode Island has become home to approximately 300 refugees annually. (Figure 1) In recent

Table 1.
Country of origin of refugees
resettled in Rhode Island,
October 1, 2004 – June 30, 2006

Country of origin	Number
Liberia	155
Thailand	37
Ivory Coast	22
Somalia	21
Ethiopia	16
Laos	16
Kenya	15
Ghana	12
Rwanda	10
Moldova	8
Sierra Leone	7
China	6
Burma	3
Burundi	3
Cambodia	3
Cuba	3
Guinea	3
Nigeria	3
Yemen	3
Philippines	2
Cameroon	1
Central African Republic	1
Eritrea	1
Russia	1
Total	352

Source: Rhode Island Refugee Program,
Rhode Island Department of Health

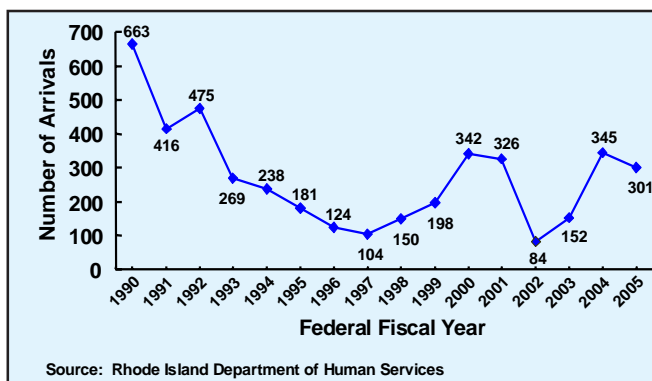


Figure 1. Total refugee arrivals in Rhode Island, by federal fiscal year, 1990 – 2005.

— Health by Numbers —

refugees from 24 countries, the majority of refugees coming from African countries. (Table 1)

Health Services for Refugees. All refugees approved for third country resettlement undergo an overseas medical examination before traveling to their new home, to ensure that they do not have medical conditions that would exclude them from eligibility to enter the United States. The results of that exam are forwarded to the refugee health program in the state where the refugee is being resettled.

The U.S. Department of State requires refugee resettlement programs to facilitate a refugee health screening within 30 days of arrival in the United States, to verify the results of the overseas exam, identify any health condition that poses a threat to the individual's or public's health, and introduce the refugee into the primary care system. Following the initial screening, refugees should be accepted into ongoing primary care at that screening site or referred to another provider.

Under federal legislation, refugees are eligible for eight months of medical coverage from their date of entry into the country. In Rhode Island, refugees are enrolled in either RIte Care or Medical Assistance for the eight-month period. The refugee health screening is a covered expense under these programs. After the guaranteed coverage expires, refugees may continue to receive state health benefits if they meet the eligibility requirements promulgated by the state's Department of Human Services.

Health Conditions Identified Among Refugees. The Refugee Health Program created the Rhode Island Refugee Health Screening Form for healthcare providers to use at the initial health assessment to document immunizations, tuberculosis and infectious disease screening, physical exam results, and referrals for mental health, nutrition, and other health services. Instituted in January 2005, the form delineates the minimum standard for an initial health assessment of refugees resettled in Rhode Island and promotes uniformity of services across institutions. The screening components included in the form are based upon the recommendations of the federal Office of Refugee Resettlement³ as well as screening and treatment recommendations issued by the **Centers for Disease Control and Prevention (CDC)**.⁴ The screening form and recommendations from the CDC can be found on the Refugee Health Program website.⁵

Health care providers who perform the domestic health assessment for refugees are asked to complete the RI Refugee Health Screening Form and submit a copy of the completed form to the Refugee Health Program. Table 2 presents data on refugee's health conditions identified on the overseas screening forms and the Program's screening forms for refugees resettled in Rhode Island between January 1, 2005, when the Program's form was instituted, and June 30, 2006.

Refugee Health Challenges. The diversity of the refugee population brings with it a host of opportunities and challenges

Table 2.
Medical conditions requiring follow-up identified among refugees resettled in Rhode Island, January 1, 2005 – June 30, 2006

Medical condition	Number
Oral health	43
Vision	34
Prior treatment for tuberculosis	30
Hypertension	29
Heart	22
Ringworm and other parasites	17
Hernia	15
Trauma	12
Pregnancy	9
Obesity	8
STD in the past year*	7
Asthma	4
Bronchitis	3
Scoliosis	3
Unspecified skin condition	2
Hearing	1
Other	25

*including diagnosis of HIV

Source: Rhode Island Refugee Program, Rhode Island Department of Health

for health care facilities. Most refugees will need translation and/or interpreting services. This is particularly important during the medical examination and follow-up. Although some refugees may speak English, sentence structure and vocabulary may be very different from American English. Accents may also make it difficult to understand or be understood.

Languages spoken by refugees resettled in Rhode Island include:⁶

Arabic	Burmese	French
Hmong	Krahn	Laotian
Liberian English	Maay Maay	Mandingo
Somali	Somali-Bantu	Thai

The National Standards for **Culturally and Linguistically Appropriate Services in Health Care (CLAS Standards)** provide mandates, guidelines, and recommendations for recipients of federal funding regarding the provision of culturally and linguistically appropriate services in healthcare settings. These standards were released in 2001 by the federal Office of Minority Health in response to Title VI of the Civil Rights Act. Of the 14 CLAS Standards, four (#4-7) are mandates enforceable by the Office of Civil Rights. The mandates speak

— Health by Numbers —

to the issue of language access and require the provision of trained interpreters and translated materials.⁷

Standard 4 – Qualified language assistance services

Health care organizations must offer and provide language assistance services, including bilingual staff and interpreter services, at no cost to each patient/consumer with limited English proficiency at all points of contact, in a timely manner during all hours of operation.

Standard 5 – Notices to patients/consumers of the right to language assistance services

Health care organizations must provide to patients/consumers in their preferred language both verbal offers and written notices informing them of their right to receive language assistance services.

Standard 6 – Qualifications for bilingual and interpreter services

Health care organizations must assure the competence of language assistance provided to limited English proficient patients/consumers by interpreters and bilingual staff. Family and friends should not be used to provide interpretation services (except on request by the patient/consumer).

Standard 7 – Translated materials

Health care organizations must make available easily understood patient-related materials and post signage in the languages of the commonly encountered groups and/or groups represented in the service area.

Conclusion. The Rhode Island Refugee Health Program is actively involved in coordinating care for refugees, providing education and training for refugees and health care providers, and performing surveillance of health conditions impacting refugees resettled in the state. As the Refugee Health Program continues, areas of focus include improving reporting of refugee health screening data, increasing access to culturally and linguistically appropriate services, and providing resources that assist health and social service providers to provide comprehensive care responsive to the needs of refugees. For additional information about the Refugee Health Program, please

visit its Rhode Island Department of Health webpage at <http://www.health.ri.gov/chew/refugee/index.php>.

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